

WRITTEN TESTIMONY OF JACQUELYN CALAMARI, MSN, MS, NEA-BC, CEN VICE PRESIDENT, PATIENT CARE SERVICES CHIEF NURSING OFFICER MIDDLESEX HOSPITAL

Wednesday, March 5, 2014

HB 5384, An Act Concerning Reports Of Nurse Staffing Levels

As the Chief Nursing Officer of the first Magnet hospital in Connecticut, I am strongly opposed to HB 5384, An Act Concerning Reports Of Nurse Staffing Levels. I do not believe this legislation is supportive of the fundamental goals of health care reform, which seeks to improve our health care system by embracing changes that will improve quality and reduce costs. In addition, I believe this legislation would not be effective in improving patient outcomes, which is the ultimate goal of quality nursing care and it would prove extremely burdensome from an administrative perspective.

As a Magnet hospital, the highest recognition a hospital can achieve for the quality of its nursing care, we are focused on ensuring we provide our patients with high quality, appropriate nursing resources. We consistently benchmark our use of nursing labor against a national database and carefully look at patient outcomes. We consistently and diligently staff for both census and acuity. In fact, all of our patient care units — from our Emergency Department to our inpatient units (including critical care) — review our census every four hours around the clock and utilize nursing float pools and additional flexible resources to staff up or down as appropriate. In this way, we not only provide the adequate numbers of staff needed, but the necessary skill mix to provide the appropriate level of care needed for each patient thus achieving the goal of high quality at a lower cost.

Nursing is a profession that requires extensive education, training, experience and, above all, keen insight into what type of care will result in improving the health of our patients.

Is it appropriate to mandate a profession that has proven its success on the depth of such knowledge? Mandating the number of nurses required to adequately care for a patient is not the answer to improving patient care. In fact, it will only place another administrative roadblock in the way of our ability to provide the highest quality of care and the most efficient use of resources for which we have been recognized and that means so much to our patients and our community.

Thank you for your consideration.

Jacquelyn Calaniai